

Trauma 101

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Overview

- Definitions
- Prevalence
- Impact of Trauma
- Trauma Informed Care
- Resiliency
- References
- Resources

A traumatic event is one in which a person experiences (witnesses or is confronted with):

- Actual or threatened death
- Serious injury
- Threat to the physical integrity of self or another

Responses to a traumatic event may include

- Intense fear
- Helplessness
- Horror
- Attachment

(Marcenich, 2009)

"Prolonged exposure to repetitive or severe events such as child abuse, is likely to cause the most severe and lasting effects."

"Traumatization can also occur from neglect, which is the absence of essential physical or emotional care, soothing and restorative experiences from significant others, particularly in children."

(International Society for the Study of Trauma and Dissociation, 2009)

Interpersonal violence tends to be more traumatic than natural disasters because it is more disruptive to our fundamental sense of trust and attachment, and is typically experienced as intentional rather than as "an accident of nature."

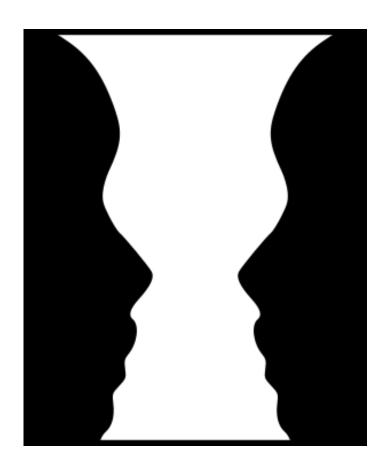
(International Society for the Study of Trauma and Dissociation, 2009)

Trauma and traumatic events include *personal* and *private* experiences and *public* experiences.

- Examples of personal and private events:
 - Sexual assault
 - Sexual abuse
 - Domestic violence/interpersonal violence
 - Witnessing domestic violence
- Examples of *public* trauma/traumatic events:
 - Natural disasters
 - War
 - Community violence

What is trauma?, cont.

- Perception of trauma varies vastly among individuals.
- Trauma is something that overwhelms our coping capacity
 - Affects the whole self
 - Physical
 - Emotional
 - Intellectual
 - Spiritual



Prevalence

A report of child abuse is made every ten seconds in the United States.

(Childhelp, 2013)

- Children who experience child abuse and neglect are 59% more likely to be arrested as a juvenile, 28% more likely to be arrested as an adult, and 30% more likely to commit violent crime.

 (Child Welfare Information Gateway, 2006)
- Trauma histories are pervasive among youth in America (especially youth from diverse cultural backgrounds).

(Marcenich, 2009)

 Children with disabilities are more likely to experience neglect than children without disabilities.

(Child Welfare Information Gateway, 2006)



Prevalence

More than 1 in 3 women (35.6%) and more than 1 in 4 men (28.5%) in the United States have experienced rape, physical violence, and/or stalking by an intimate partner.

(CDC,2013)

Nearly 80% of female offenders with a mental illness report having been physically and/or sexually abused.

(Marcenich, 2009)

The majority of clients served by public mental health and substance abuse service systems are survivors of trauma.

(Mueser et al, 1998)

 Seventy-five percent (75%) of women and men in treatment for substance abuse report trauma histories.

(SAMSHA/CSAT, 2000)



Prevalence

ACE STUDY

- Research study of 17,000 participants.
- Adverse Childhood Experiences (ACEs) can affect an individual's physical and emotional health throughout the life span.
- Trauma/traumatic experiences are far more prevalent than previously recognized.



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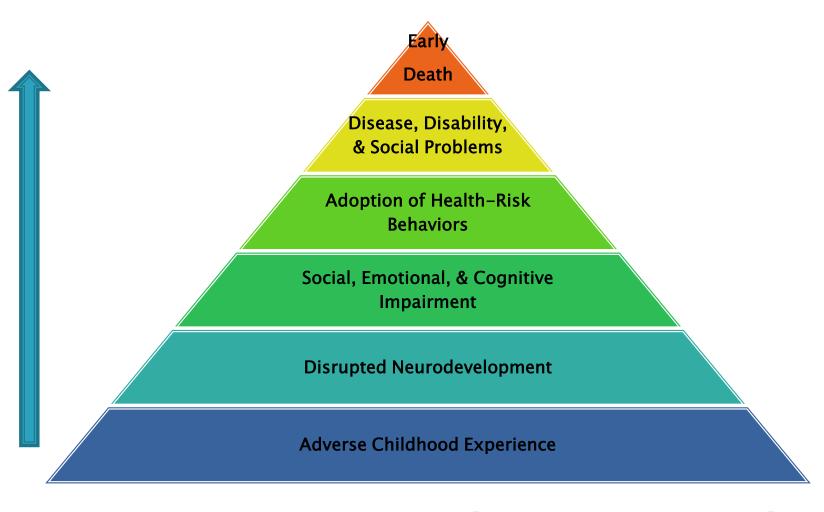




R. F. Anda, MD, MS

Centers for Disease

Control and Prevention



ACEs Conceptual Framework

Impact of Trauma

- Activation of survival responses:
 - Fight
 - Flight
 - Freeze
 - Submit
- Shutting down of non-essential tasks.
- Rational thought is less possible at this time.

(Hopper, 2009)



Impact of Trauma

- Prolonged exposure to trauma and/or repetitive traumatic events MAY:
 - Cause an individual's natural alarm system to no longer function as it should.
 - Create emotional and physical responses to stress.
 - Result in emotional numbing and psychological avoidance.
 - Affect an individual's sense of safety.
 - Diminish an individual's capacity to trust others

(Hopper, 2009)

Impact of Trauma

- The following responses to trauma/traumatic events are components of Posttraumatic Stress Disorder (PTSD):
 - Hyperarousal: nervousness, jumpiness, quickness to startle.
 - Re-experiencing: intrusive images, sensations, dreams, memories
 - Avoidance and Withdrawal:
 - feeling numb, shutdown or separated from normal life
 - pulling away from relationships and/or activities
 - avoiding things that trigger memories of trauma/s

A Model of Treatment: Three Phases

Safety and Stabilization
Processing of Traumatic Material
Reconnection and Reintegration



Phase One: Safety and Stabilization

- Attention to basic needs including:
 - connection to resources
 - self-care
 - identification of support system
- Focus on the regulation of emotion and develop capacity to self-soothe.
- Education on trauma and treatment process.



Phase Two: Processing and Grieving of Traumatic Memories

"The primary goal of this phase of treatment is to have the patient *acknowledge*, *experience and normalize* the emotions and cognitions associated with the trauma *at a pace that is safe and manageable*."

(Luxenberg, Spinazzola, Hildago, Hunt and van der Kolk, 2001)

Phase Three: Reconnection

- Development of a firm or a new sense of self
- Development of healthy and supportive:
 - Friendships
 - Intimacy
 - Spirituality



Trauma Informed Care

- Aims to avoid re-victimization.
- Appreciates many problem behaviors began as understandable attempts to cope.
- Strives to maximize choices for the survivor and control over the healing process.
- Seeks to be culturally competent
- Understands each survivor in the context of life experiences and cultural background.

(Alvarez and Sloan, 2010)

Resiliency

"Resiliency is the capability of individuals to cope successfully in the face of significant change, adversity, or risk. The capacity changes over time and is enhanced by protective factors in the individual and environment."

(Stewart et al., 1991 as cited by Greene and Conrad, 2002)

Protective Factors

There are behaviors, characteristics and qualities inherent in some personalities that that will assist in recovery after exposure to a traumatic event, these are called, protective factors.



Environment

- A reliable support system (friends, family).
- Access to safe and stable housing.
- Timely and appropriate care from first responders.

Behaviors

- Good Self care such as: sleeping at least eight hours a night.
- Eating nutritious foods.
- Exercise
- Practicing good boundaries.
- Using positive coping mechanisms verses negative coping mechanisms.



Resiliency as a Trait

- A vigorous approach to life
- A sense of meaningfulness
- An internal locus of control (vs. external)
- A way to conceptualize this is the "ability of a person to bounce back from challenges through feelings of control, commitment and the ability to see change as a challenge."

(Phelps et al., 2009)

Post-traumatic Growth

"Resilient survivors continue therefore, to grow and even thrive in spite of and quite often because of their history."

(Armour, 2007)

- Survivors of trauma who strengthen their abilities and find wisdom that allow them emotional growth in relationship with other are often referred to as experiencing post-traumatic growth.
- Post-traumatic growth is reflected in the following:
 - strengthening of relationships/sense of connection
 - increased sense of personal strengths
 - awareness of increased possibilities in life

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American Psychological Association's Disaster Response Network

Website: http://www.apa.org/practice/programs/drn/index.aspx

Description: Disaster Response Network professionals engage in a crisis response to disasters. Resources include trauma response guidelines and self care resources.

American Red Cross

Website: http://www.redcross.org/

Description: Organization responds to the immediate needs of crisis/trauma survivors. Training for professionals to become first responders provided by Red Cross.

International Society for Traumatic Stress Studies

Website: http://www.istss.org/Home.htm

Description: An international collection of studies, research and education regarding trauma. Organization is responsible for the publication, Journal of Traumatic Stress. Includes membership opportunities. Also provides guidelines for treatment of trauma.

National Child Traumatic Stress Network

Website: http://www.nctsn.org/

Description: Program works to educate professionals and nonprofessionals about trauma and evidenced based practices for trauma interventions. Site provides definitions of different types of trauma and

evidence based practice resources.

Sidran Institute: Traumatic Stress Education and Advocacy

Website: http://www.sidran.org/index.cfm

Description: An international non-profit organization dedicated to assisting individuals, professionals and communities. The Institute works to provide education and resources related to trauma informed care. Additional information is offered regarding dissociation and co-occurring disorders such as substance abuse.

The International Society for the Study of Trauma and Dissociation

Website: http://www.isst-d.org/

Description: Association dedicated to research and education on trauma and dissociation. Includes extensive resources for professionals such as literature and trainings. An informative FAQ section and information for clients. Additionally, an extensive list of additional electronic resources.

The Trauma Center at Justice Resource Institute

Website: http://www.traumacenter.org/index.php

Description: The Center is a treatment and training center founded by Dr. van der Kolk internationally renowned expert in trauma. Trainings are provided for practitioners, resources to evidenced based methods and recent research. Also provides direct services to trauma survivors.

United States Department of Veterans Affairs: National Center for PTSD

Website: http://www.ptsd.va.gov/

Description: Information for survivors and providers. Information on veteran's benefits. Resources for PTSD diagnosis. Extensive information regarding PTSD such as the neurobiology of PTSD information and resources for PTSD interventions.